



REQUEST FOR PROPOSALS

Texas Department of Health Innovation Grants

(Permanent Fund for Children and Public Health)

**1100 W. 49th Street
Austin, Texas 78756-3199
February 2000**

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Chair, Texas Board of Health**

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Commissioner of Health**

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1. INTRODUCTION

The Texas Department of Health (TDH) announces the expected availability of State General Revenue funding to provide grants for three goals which are referred to as “Parts.”

- Part I. Grants for Developing and Demonstrating Cost-effective Prevention and Intervention Strategies for Improving Public Health Outcomes.
- Part II. Grants to Local Communities to Address Disparities in Health in Minority Populations
- Part III. Grants to Local Communities for Essential Public Health Services

Grants are limited and will be awarded on a competitive basis.

This document, the Request for Proposal (RFP) contains the requirements that applicants must meet to be considered for funding. Applicants who wish to be considered for TDH Innovation Grants are required to submit proposals in accordance with the instructions contained in this RFP. Proposals that do not comply with the instructions in this RFP may be disqualified or downgraded.

Applicants should submit proposals that are complete and written in clear, concise language. Certain forms that have been required in past TDH RFPs for other programs have been deferred until the contract negotiations phase.

IMPORTANT: APPLICANTS SHOULD READ THIS RFP COMPLETELY BEFORE PREPARING THEIR PROPOSALS.

2. BACKGROUND, LEGAL AUTHORITY, AND PURPOSE

The TDH Innovation Grants were created in 1999 by the 76th Texas Legislature (HB 1676). The Legislature determined that a significant portion of funds received by the State of Texas from the recent tobacco legislation should be appropriated to certain permanent funds. One of those permanent funds, called the Permanent Fund for Children and Public Health was established for “certain public health purposes” and was appropriated \$100 million. The interest from the fund is available to TDH to accomplish the goals of the Fund.

The legal authority for the grants is Government Code, §403.1055, relating to the Permanent Fund for Children and Public Health, and the Health and Safety Code, §121.0065, relating to Grants for Essential Public Health Services.

The intent of the TDH Innovation Grants is to improve public health outcomes at the community level, using innovations that can be replicated in many places in Texas. To the maximum extent possible, the grants are intended to bring about improvements in health status that are demonstrable or measurable. No funds from the grants will be authorized to pay for direct health care services, except when providing direct health care services is incidental to addressing an essential public health service within the objectives of a grant.

TDH maintains an Internet web site with information regarding this grant program

<http://www.tdh.state.tx.us/innovation>

Currently the web site contains: this RFP, the applicant conference information, the rules for the grant program, text of the two House bills related to the grant program (HB 1676 and HB 1444), and the report of and other documents related to the HCR 44 (75th Legislature) workgroup which studied local public health issues. TDH updates the web site on a routine basis.

3. FUNDING

- A. Approximately \$8,400,000 is expected to be available to fund projects in all three parts. TDH intends to award grants of 33 1/3% (one-third) of the available grant funds to proposals in each part. However, if the funds for a part are not completely expended or allocated, TDH will have the authority to redistribute funds among the other two parts based on unfunded responses to a previous or subsequent request for proposals.
- B. Continued funding in future years will be based upon the availability of funds and documented progress of the project during the prior budget period. Funding may vary and is subject to change for each budget period.
- C. Funds may not be used to supplant local or State funds.
- D. The actual dollar amount awarded to each project will depend upon TDH's assessment of the merits of the proposal.
- E. Any single grantee may be awarded multiple contracts but may receive a maximum of \$1,000,000 for the 14-month budget period.
- F. TDH intends to fund up to 30 projects.
- G. Grants made under Part III will be allocated in such a way so that the total amount of funds available is equally divided between services for rural and urban areas of the state.

A rural area is a county that had a population in the most recent decennial United States census of 150,000 or less, or that part of a county with a population of greater than 150,000 that is not delineated as urbanized by the United States Census Bureau. An urban area is a county or part of a county that is not a rural area.

Note that the determining factor in deciding whether a grant is for an urban or rural area is whether an urban or rural area is **receiving the services**. For example, a grantee may be located in an urban area but may be proposing to serve a rural area. In this example, the grant would be considered a rural grant. **Applicants must specify whether a rural or urban area (or both) will be receiving the services proposed.**

4. PROPOSALS

In order to encourage creativity and innovation in proposals, TDH has left a large proportion of the grant funds available for uncategorized projects. A few categorized projects of particular interest to the agency are included as follows:

A. Part I. Grants for Developing and Demonstrating Cost-effective Prevention and Intervention Strategies for Improving Public Health Outcomes.

Research on the Epidemiology and Causes of Childhood Obesity in Texas Up to \$450,000 is available for projects that will assess the problem of childhood obesity in Texas. The project(s) should include a plan to assess quantitatively the burden of obesity in Texas children using accepted epidemiological methods and scientific standards. The project(s) should assess the prevalence of obesity in Texas in various geographic and demographic groups. The project(s) should design a model for an ongoing surveillance system on childhood obesity and make recommendations about the frequency with which data should be collected on heights and weights of school-aged children. In addition, the project(s) should (a) seek to describe the detailed risk factors for obesity in Texas, and (b) to the extent possible, explore the underlying causes of childhood obesity and define the role of nutrition and the habits of daily life on the incidence of childhood obesity in this State. Proposals should describe in detail the method of study, data collection, analysis, and dissemination of results. If the proposal includes a sampling method, it should include details of the method and analysis, including statistical considerations.

Dramatization of Public Health Problems and Community Action in Texas A total of \$90,000 is available for projects that will dramatize the role of public health in Texas communities and in the lives of ordinary Texans. The goal of the project is to help educate community leaders and others about the importance of public health activities and the importance of their support and participation in those activities. Research indicates that only a tiny proportion of the Texas population understands the nature of public health and its role in their lives. In addition, the role of public health has evolved as the nature and understanding of health threats has evolved from a disease model toward an understanding of determinants of health such as risky behaviors. Proposed projects should aim to dramatize the day-to-day importance and potential for positive impact of public health activities in Texas communities through audio, visual, or written media. Projects should concentrate on public health problems and activities at the local or community level. The activities depicted may be those of local health departments, community organizations, individuals, schools and universities, or other public or private entities. In general, the project is not intended to promote

the activities of TDH or other state or federal governmental entities, although, because of the important roles of these entities in the daily practice of public health in Texas communities, incidental mentions of such agencies may be appropriate within the context of the project. In addition to other requirements, proposals should describe the ability of the applicant to research and understand the nature of public health problems and actions in communities, details of the nature of the materials to be created, and how such materials can be used and distributed.

A Comprehensive Descriptive Analysis of Morbidity and Mortality in Texas Up to \$375,000 is available for intensive studies of morbidity and mortality in Texas. The study should analyze in detail the causes of morbidity and mortality in Texas for a period of up to 30 years by geography, age, race, ethnicity, and other demographic characteristics. The study should identify trends in overall Texas morbidity and mortality and specific causes of morbidity and mortality over the study period in various geographic and demographic categories, with an emphasis on Texas' minority populations. Wherever possible and appropriate, measures of morbidity should include quality-of-life adjustments. The project should be able to conclude whether morbidity and mortality have been higher or lower in various geographic, racial, and ethnic groups over time and should describe the differing major causes of morbidity and mortality in major population groups. Wherever feasible and appropriate, the project should utilize methods of geographic information systems and detailed maps of Texas that reflect trends in morbidity and mortality. In addition to other requirements, the proposal should specify the source(s) of the data to be used in the analysis, the scope of the analysis, the approach and methods to be used, and the expertise and experience of the analysts. Projects that propose to use morbidity or mortality datasets held by TDH will be expected to comply with TDH rules regarding the public or research use of such datasets.

Other Innovation Grants A total of approximately \$1,885,000 is available for other innovation grant proposals for developing and demonstrating cost-effective prevention and intervention strategies for improving public health outcomes. Within the limits set out in the rules governing these grants, projects may address any public health problem or issue within the State of Texas. The Department anticipates that few, if any, of these grants will be higher than \$400,000 or lower than \$25,000.

B. Part II. Grants to Local Communities to Address Disparities in Health in Minority Populations

Minority populations are African-Americans, American Indians, Asians and Hispanics in Texas. Applicants may address subgroups within these classifications (for example, Korean-Americans, recent immigrants versus second-generation Texans) as appropriate.

Prevention in the Minority Youth Population of Texas A total of \$550,000 is available for projects that investigate and articulate the underlying causes of risky health behaviors among minority youths in Texas, including, but not limited to early sexual activity, substance abuse, and violence, or behaviors that lead to diseases that disproportionately affect minority populations. The inquiry should use accepted research methods, including but not limited to epidemiologic and demographic analyses of individuals, families or groups or methods of collecting detailed anecdotal information, such as focus groups or in-depth personal stories (through interviews) that may shed light on the underlying causes of risky behaviors in individuals. Projects are encouraged to use innovative methods of data collection and analysis. Proposals should explain the rationale and likely outcomes of the project in detail, including how the findings are likely to aid in the development of prevention principles and programs for the minority populations of Texas. Projects may involve large geographic areas such as the entire State, or smaller ones, such as a county or city. Projects should be conducted in areas of Texas that contain a significant proportion of minority population.

Other Innovation Grants A total of approximately \$2,250,000 is available for other innovation grant proposals under Part II for addressing specific public health priorities, particularly to address disparities in health in minority populations. Within the limits set out in the rules governing these grants, projects may address any public health problem or issue within the State of Texas. The Department anticipates that few, if any, of these grants will be higher than \$400,000 or lower than \$25,000. Projects should be carried out in parts of Texas that contain a significant proportion of minority populations.

C. Part III. Grants to Local Communities for Essential Public Health Services

A total of approximately \$2,800,000 is available for other innovation grant proposals under Part III for essential public health services. Within the limits set out in the rules governing these grants, projects may seek to provide one or more essential public health service. The Department anticipates that few, if any, of these grants will be higher than \$500,000 or lower than \$25,000.

5. GENERAL REQUIREMENTS

A. Eligible Applicants

Part I: Any person or other entity, public or private, except TDH

Part II: Any county, municipality, public health district, or other political subdivision, including hospital districts, or local nonprofit organization in Texas

Part III: Any county, municipality, public health district, or other political subdivision, including hospital districts, in Texas

Applicants may submit proposals for grants under one, two, or all three parts, including proposals for funding one project under more than one part, or proposals for multiple projects under different parts. Such proposals should clearly **specify the part(s) for which the proposal seeks funding and the specific amount of funding sought under each part.**

B. Budget Period

TDH expects that the initial grants will be awarded beginning on or about July 1, 2000 for a 14-month period; that is, through the end of the State fiscal year ending on August 31, 2001. Some applicants may wish to submit proposals for projects that would extend beyond August 31, 2001. Such proposals will be considered for initial and continued funding into future years, with the following limitations:

1. Because the funding for future grants is dependent upon the biennial legislative appropriation process, TDH cannot contract for funding beyond August 31, 2001. Thus, any funding beyond August 31, 2001 will be contingent upon appropriations and further approval by TDH through contract negotiations. Applicants should take this into account in designing their proposals.
2. No proposals will be considered for funding beyond August 31, 2003.

C. Schedule of Events

The following schedule is subject to revision at the discretion of TDH. Changes will be posted on the web site and published in the *Texas Register*.

1. Applicant conference in Austin
(optional for applicants) **03/10/00**
2. Deadline for Submission of Proposal **04/18/00**
3. Written Notification to Applicants **06/02/00**
4. Contract Development and Execution **06/05-06/30/00**
5. Contract Begin Date **07/1/00 or later**

D. Program Contact

The sole contact for questions or inquiries regarding this RFP is Gyl Kovalik. Ms. Kovalik, or other contacts authorized by the Commissioner, are the only TDH employees authorized to clarify, modify, amend, alter, or withdraw project requirements, terms, and conditions of the RFP.

To ensure fairness in the competitive award process, other employees and representatives of TDH have been instructed not to communicate with potential applicants or their representatives regarding this RFP prior to the award date. Applicants who contact TDH employees or representatives other than the sole contact listed above on matters related to this RFP before the award date may be disqualified for current or future grants. However, potential applicants may contact TDH program and regional staff regarding potential projects in order to seek program or regional staff input on potential projects' design and/or to seek TDH program or regional staff collaboration in implementing the project if it is funded.

All communications concerning this RFP must be addressed in writing to:

Gyl Kovalik
Office of Policy and Planning
Texas Department of Health
1100 West 49th Street
Austin, Texas 78756-3199
FAX (512) 458-7344
gyl.kovalik@tdh.state.tx.us

The physical address for overnight and personal deliveries is:

Office of Policy and Planning
Texas Department of Health
1100 West 49th Street, Room M-660
Austin, Texas 78756-3199

E. Applicant Conference

An optional applicant conference will be held to provide technical assistance to applicants in preparing their responses. The conference will be held on **Friday, March 10, 2000 from 10:00 a.m. to 4:00 p.m.**, at “The Meeting Place”, 2100 Northland Drive, Austin, Texas. Registration will be from 9:00 to 10:00 a.m. Attendance is optional for interested applicants, but will be restricted to 150 participants because of space limitations. Any interested person must reserve a place by faxing a request to the department as outlined in the Applicant Conference Information which will be posted on the web site at <http://www.tdh.state.tx.us/innovation>. Attendance or non-attendance at the applicant conference will have no effect on the evaluation of applications.

All questions during the conference must be written on index cards that will be handed out at the beginning of the conference. The cards will be collected throughout the day.

Questions may be answered at the conference but no answer will be binding until it has been included in the “Questions and Answers” document.

F. Questions and Answers Document

In addition to the questions collected at the applicant conference, additional written inquiries concerning the RFP must be received no later than **5:00 P.M., C.S.T., March 31, 2000**. Responses to inquiries of a general nature will be distributed in a “Questions and Answers” (Q&A) document to each organization that attends the applicant conference, sends in a written inquiry, requests the Q&A document, or requests this RFP. Responses to inquiries of a specific nature will be provided only to the requestor. TDH will be the sole judge of whether a request is of a general or specific nature. The Q&A document will also be put on the web site (<http://www.tdh.state.tx.us/innovation>) and updated regularly.

6. PROPOSAL REVIEW, SELECTION, AND NEGOTIATION

Proposals will be reviewed according to the criteria below. All proposals will remain with TDH and will not be returned to the applicant.

A. Screening Proposals

Proposals will be initially screened for eligibility and completeness. Proposals that do not meet the requirements in this RFP may not be considered for review or may receive lower scores at the discretion of TDH. Applicants not being considered for further review will be notified in writing.

B. Program Review Process

TDH will establish a panel(s) of TDH employees and persons from outside TDH who will review the responses to this RFP and make recommendations to the Commissioner for awards. Panel members from outside TDH will receive no compensation or reimbursement for expenses. No panel members will be a current applicant for a grant on which the panel member would be making recommendations.

The Commissioner or his designee will make the final funding decision.

D. Program Review Tools

The Office of Policy and Planning will develop a review tool for use by the review committee. The review tool will award a maximum of 200 points. One hundred (100) points may be awarded for the general content requirements of this RFP, as described in **section 8, Proposal Content**. An additional 100 points may be awarded based on the following preferences:

1. demonstrates innovation(s) that are replicable in other parts of Texas. An innovation is defined as a solution, analysis, intervention, program design, evaluation method, or administrative method that is substantially new to the area where the innovation is being introduced. Replicable means that some aspect of the innovation proposed could reasonably be assumed to inform public health practices in another community in Texas.

Part I - 20 points Part II - 10 points Part III - 10 points

2. documents the intent and ability of the applicant to communicate and collaborate with elements of the community that deliver essential public health services (**see Appendix A for a list of the essential public health services**), health care providers, consumers, businesses, educational institutions, governmental agencies, law enforcement agencies, or religious institutions and how community needs have been or will be determined and addressed;

All applicants are encouraged to discuss their interests and ideas for developing projects with public and private sector partners throughout communities early in the planning stage. Community support should be assured by public and private participation in the planning, development, implementation, and assessment phases.

Part I - 20 points Part II - 25 points Part III - 25 points

3. demonstrates a strong financial commitment on the part of the applicant toward the activities proposed including direct funding or significant in-kind contributions from the applicant, local entities, private donors, state agencies, federal grantors, or private foundations;

Part I - 15 points Part II - 5 points Part III - 15 points

4. with respect to Part I and II grants, considers or inquires into one or more of the underlying causes of public health problems;

Part I - 20 points Part II - 40 points Part III - 0 points

5. addresses or demonstrates cost-effectiveness or cost benefit;

Part I - 10 points Part II - 10 points Part III - 10 points

6. includes a plan for the dissemination of methods, findings or conclusions such as publication in the public health or medical literature, presentations locally and at statewide events, using the Internet, or other avenues;

Part I - 15 points Part II - 10 points Part III - 10 points

7. with respect to Part III grants, demonstrates a contribution to strengthening the essential public health services infrastructure;

Part I - 0 points Part II - 0 points Part III - 25 points

8. with respect to Part III grants, demonstrates that the applicant has or will develop a local health board or other appropriate advisory group during the grant period.

Part I - 0 points Part II - 0 points Part III - 5 points

D. Selection and Contract Negotiation

Once award decisions are made, TDH will negotiate contracts within the framework of the program goals and the funds available. The applicants selected for contract awards may be asked to revise the budgets, as well as the goals and objectives, of their proposals in order to achieve the program's goals within available funding limits.

TDH funds for this grant program are dependent on the availability of the appropriations. Because of limitations on the timing of the obligation or expenditure of State monies, it may be necessary for TDH to negotiate different schedules for the actual transfer of the monies to each successful applicant or to place limits on the timing of the expenditures of the grants by each successful applicant. This will be part of the contract negotiation process.

The applicant will submit written revisions reflecting negotiated changes. Once the contract negotiation process is complete, TDH will initiate the development of a contract.

Each applicant whose proposal is selected for funding will receive written notification. This notice is an announcement of selection, and the receipt of the notice is not legally binding until there is a fully-executed contract.

Each applicant not selected for a contract will also receive a timely written notification that its proposal will not be funded.

7. TDH ADMINISTRATIVE INFORMATION

A. Incurring Costs and Rejection of Proposals

Any costs incurred in the preparation of the proposal will be borne by the applicant and are not allowable costs. TDH reserves the right to reject any or all proposals and is not liable for any costs incurred by the applicant in the development, submission, or review of the proposal.

B. Right to Amend or Withdraw RFP

TDH reserves the right to alter, amend, or modify any provisions of this RFP or to withdraw this RFP at any time prior to the execution of a contract. The decision of TDH will be administratively final in this regard.

C. Financial and Administrative Requirements

If an applicant has not had a contract with TDH within the past 24 months, the applicant will submit with its proposal a copy of the applicant's most recent Balance Sheet and Statement of Income and Expenses. TDH will evaluate the financial statements and may, at its sole discretion, reject the proposal on the grounds of the applicant's financial capability.

All current contractors and/or selected applicants administering two or more TDH contract attachments are required to maintain integrity between the transactions affecting each contract attachment by (1) maintaining a completely separate set of records for each contract attachment or (2) establishing within the chart of accounts and general ledger a separate set of accounts for each contract attachment.

The applicant is encouraged to secure additional funds from other sources as necessary to strengthen the overall application.

D. Authority to Bind TDH

The Commissioner of Health, or the Chief, Bureau of Financial Services (or a designee), are the only individuals who may legally commit TDH to the expenditure of public funds. No costs chargeable to the proposed contract can be reimbursed before TDH receives a fully-executed contract.

E. Contracting with Subcontractors and Vendors

A selected applicant may enter into contracts with subcontractors or procurement contracts with vendors. Applicants will be responsible to TDH for the performance of any subcontractor or vendor.

If the applicant enters into contracts with subcontractors or procurement contracts with vendors, the documents will be in writing and will comply with the requirements specified in the General Provisions for Texas Department of Health Grant Contracts (see **Appendix B: sample TDH Contract General Provisions**).

If an applicant plans to enter into a contract with a subcontractor or a procurement contract with a vendor that delegates a substantial portion of the scope of the project or exceeds \$25,000 of the applicant's approved funding, the applicant must submit justification to TDH and receive prior written approval from TDH before entering into the contract.

F. Contract Information

After the proposal review process is completed, the final funding amount and the terms of the contract will be determined through negotiations between TDH and the applicant. The specific Scope of Work will be developed from information contained in the RFP and the proposal. TDH reserves the right to adjust the funding allocation during the term of the contract, pursuant to the terms of the contract. A selected applicant is subject to the General Provisions for TDH Grant Contracts. Any exceptions to any of the requirements in the RFP must be specifically noted and satisfactorily explained by the applicant in the proposal as a condition for allowing those exceptions in the contract. A sample of the TDH Contract General Provisions are included as **Appendix B**.

G. Protest of Application or Bid Denial

TDH has established a procedure for dispute resolution for any applicant that has responded to this RFP. An applicant may request review of a TDH action that denies the award of a contract to that applicant after response to this solicitation by following the procedures and time frames included in **Appendix C: TDH Executive Order XO-0110, Protest of Application or Bid Denial**.

8. PROPOSAL CONTENT

C Proposal Submission Information and Deadline

Applications (original and five copies) must be received on or before **5:00 P.M., C.S.T., April 18, 2000. PROPOSALS RECEIVED AFTER THE PROPOSAL DEADLINE WILL NOT BE CONSIDERED.**

The original proposal and five copies must be submitted to:

Gyl Kovalik
Office of Policy and Planning
Texas Department of Health
1100 West 49th Street
Austin, Texas 78756-3199

TDH will not accept proposals by facsimile transmission or E-mail.

Proposals may be mailed or hand-delivered to the TDH program address above on or before the proposal deadline.

If a proposal is hand-delivered to the TDH program address above, be sure to request a receipt at the time of delivery to verify that the proposal was received by the Office of Policy and Planning on or before the proposal due date and time.

If a proposal is mailed, it will be considered as meeting the deadline if it is:

- * received on or before the due date, or
- * postmarked on or before the due date and received in time for submission to the program review team. (Applicants must request a legibly-dated U.S. Postal Service postmark or obtain a legibly-dated receipt from a commercial carrier service or the U.S. Postal Service. Private metered postmarks will not be acceptable proof of postmark.)

B. Assembly

To facilitate review and processing of the proposals, each proposal should meet the following stylistic requirements:

- a table of contents
- all pages clearly and consecutively numbered
- original and 5 copies, unbound original
- typed by computer or typewriter

- single-spaced
- 12-point font on 8 ½" x 11" paper with 1" margins
- printed on one side only
- signed in ink by an authorized official (copies need not bear an original signature) and
- blank forms provided in **section 9. Blank Forms and Instructions** must be used (electronic reproduction of the forms is acceptable).

Specific instructions for each required section are provided.

During the contracting phase, TDH will require that all preliminarily selected applicants complete additional forms (e.g., assurances, certifications, administrative information). Those additional forms will be available for inspection on the innovation grants web site (<http://www.tdh.state.tx.us/innovation>).

C. Confidential Information

The applicant must clearly designate any portion(s) of the proposal that contain(s) confidential information and state the reasons the information should be designated as such. Designations that mark the entire application as confidential will not be honored. If any information is marked as confidential in the application, TDH will determine whether the requested information is excepted from disclosure under the Open Records Act, Texas Government Code, Chapter 552, VTCA. If it constitutes an exception and if a request is made by any other entity for the information marked as confidential, the information shall be forwarded to the Texas Attorney General along with a request for a ruling on its confidentiality. The Attorney General's procedure includes obtaining input from the applicant. Applicants are advised to consult with their legal counsel regarding disclosure issues and to take the appropriate precautions to safeguard trade secrets or any other confidential information. Following the award of any contract, responses to this RFP are subject to release as public information unless any proposal or specific parts of any proposal can be shown to be excepted from disclosure under the Open Records Act, Chapter 552, Texas Government Code.

D. Organization and Arrangement of the Proposal

Note that points are designated for certain of the forms or other information required below. As described in **section 6. E. Program Review Tools**, applicants may be awarded a total of 100 points for the elements listed below according to the points listed.

1. Face Page - Proposal for Financial Assistance

This form (see Form A) requests basic information about the applicant and the project, including the signature of the authorized representative. The face page is the cover page of the proposal and must be completed in its entirety.

2. Proposal Checklist

This form (see Form B) is provided to ensure the proposal includes all of the information requested. The Proposal Checklist immediately follows the face page and must be completed.

3. Contact Person Information

This form (see Form C) provides information to TDH about the appropriate contact persons in the applicant's organization.

4. Project Abstract—no longer than one page

Provide an executive summary description of the project for reviewers.

5. Assessment Narrative - no longer than three pages (10 points)

The applicant is encouraged to utilize existing data sources and assessments when completing this portion of the application. Note that the community/target population being addressed by the proposal may be as large as the entire state of Texas or as small as is reasonable for the proposed project. Following are the required assessment items:

- a. A synopsis of the available data on the target population including:
 - geographic boundaries; (for Part III proposals, the applicant must include a designation of whether the target population is in a rural or urban area according to the definition in section 3. H.)
 - demographic data (age, gender, ethnicity, etc.);
 - socioeconomic data (per capita income, poverty levels, unemployment, occupational data, etc.); and

- general description of community-wide health status (e.g., key morbidity/mortality statistics).
- b. A description of gaps in resources and potential barriers to improving health status in the target population.

6. Organization Summary - no longer than three pages (10 points)

The applicant must provide a narrative description including:

- a. the legal name of the applicant,
- b. the type of organization, for example, municipality, nonprofit corporation, etc.,
- c. any affiliations,
- d. its overall purpose or mission statement,
- e. a brief history of its accomplishments,
- f. organizational structure (include an organizational chart. Make sure that the chart shows positions such as the board of directors, officers, advisory councils or committees, local health board and/or staff. Include existing filled positions, existing vacant positions, and proposed positions.),
- g. prior experience in the type of program proposed,
- h. organization's contracting experience, and
- i. other detail that demonstrates the organization's qualifications.

7. Project Description and Work Plan (60 points)

Applicants must submit a comprehensive plan. The plan must include a clear and concise discussion of each of the following topics:

- a. the goals and objectives of the project,
- b. the proposed activities with time lines for accomplishing the objectives,
- c. the population to be served,

- d. how the project will address the needs and the problems identified in the community assessment and how the proposed project will overcome these problems/meet these needs,
- e. how and by whom the activities will be conducted (include a job description of the project director),
- f. with regard to Part III applications, whether a rural or urban area (or both) will be receiving the services proposed,
- g. whether the proposal seeks funding for Parts I, II, and/or III (as described in section 1. Introduction and section 5. A. Eligible Applicants) and the specific amount of funding sought under each part,
- h. how the proposal addresses one or more of the essential public health services,
- i. how improvements in health status that are demonstrable or measurable will be made, or, what specific positive outcomes will be reached,
- j. with regard to Part II applications, how the program addresses disparities in morbidity, mortality or health status in minority populations,
- k. whether and how each of the preferences in section 6. C. are addressed,
- l. With regard to Part III applications, applicants must demonstrate that they have a local health authority as defined under the Local Public Health Reorganization Act, Health and Safety Code, Chapter 121, prior to the grant funds being awarded. A TDH regional director cannot serve as the local health authority for Part III grants recipients.
- m. when applicable, the proposal must demonstrate how the applicant plans to use, collect and evaluate data. Describe:
 - what baseline data will be used;
 - what data will be collected;
 - how the data will be collected and tabulated;
 - who will be responsible for data collection and reporting;
 - how often data collection activities will occur.

8. Performance Measurement Requirements (10 points)

Applicants agree that in the event a contract is awarded, performance measure(s) will be used to assess, in part, the applicant's effectiveness in meeting the objectives for the project.

The applicant must identify performance measures for project objectives and propose target levels of performance for each measure that are related to some baseline indicators. The proposed measures and levels of performance and the baseline indicators will be negotiated and agreed upon by the applicant and TDH if the applicant is selected to negotiate a contract.

Performance measures are defined as outcome, output, efficiency, and explanatory measures. A well-written measure will include the following components: who will deliver the service(s) and their qualifications (as appropriate); a deliverable (a product or service and how much); schedule/time frame; and a standard of performance.

9. Quality Assurance (10 points)

The proposal must contain the following information regarding quality assurance:

- demonstrate how the applicant will ensure quality in every aspect of the program including the delivery of the program and the collection and interpretation of data,
- describe the quality assurance plan and processes that will enable the project to meet standards and expectations,
- describe the applicant's ability to provide services to culturally diverse populations, where applicable,
- details about responsible personnel, staff credentials, performance review, and use of standards and protocols.

E. Financial Information

1. **Funding Information.** The funding information form (see Form D) requests information on funding from other non-TDH State of Texas agencies and projected federal expenditures. Letter(s) of good standing from other non-TDH state agency funding sources that validate the applicant's programmatic, administrative, and financial capability should be placed after this form. If the applicant is a state agency or an institution of higher education, letters of good standing are not required.

2. **Budget.** All applicants must complete the budget summary form (see Form E) and the detailed budget category forms (see Form F) which include space for a narrative justification for the budget request. Definitions of the cost categories and instructions for the forms are provided in **Section 9. Blank Forms and Instructions.**
3. **Child Support Regulations.** If the applicant is an individual or a for profit organization, a Child Support Certification must be completed (see Form G). The form requires the name and social security number of the individual or sole proprietor, or each partner, shareholder, or owner with an ownership interest of at least 25 percent, and certifications and acknowledgment of responsibilities regarding delinquent child support obligor(s) as specified by Section 231.006, Family Code.

9. BLANK FORMS AND INSTRUCTIONS

Form A
Texas Department of Health
Face Page - Proposal for Financial Assistance

1. APPLICANT INFORMATION	
1a. Legal Name:	
1b. Address (include Street & Mailing Addresses, City, County, State and Zip Code):	
1c. PAYEE Name and Mailing Address (if different from Applicant):	
1d. Employer Identification No. or State of Texas Comptroller Vendor Identification No. (14 digit):	
1e. Applicant's Legal Authority to Contract:	
2. TYPE OF ENTITY (enter appropriate letter in box): If response is F. or G., is entity a HUB? Yes/No _____ A. City E. Nonprofit Organization I. Other (specify) _____ B. County F. Individual C. Other Political Subdivision G. For Profit Organization D. State Agency H. State Controlled Institution of Higher Learning	
3. TYPE OF PROPOSAL (check one:) New _____ Continuation _____	
4. PROPOSED PROJECT PERIOD: Start Date _____ End Date _____	
5. COUNTIES AFFECTED BY PROJECT:	
6. AMOUNT OF FUNDING REQUEST:	
7. ALL DATA IN THIS PROPOSAL ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT, AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.	
7a. Typed Name & Title of Authorized Representative	7b. Telephone Number ()
7c. Signature of Authorized Representative	7d. Date

Form A
Face Page - Proposal for Financial Assistance
Instructions

This form provides information about the applicant and the proposed project with the Texas Department of Health (TDH). It is required to be completed and returned with the applicant's response to TDH's Request for Proposal. Please follow the instructions below to complete the face page form.

1. APPLICANT INFORMATION

- 1a. Enter the legal name of the applicant.
- 1b. Enter the applicant's complete street and mailing addresses, city, county, state, and zip code.
- 1c. Enter the PAYEE's name and mailing address if PAYEE is different from the applicant. The PAYEE is the corporation, entity or vendor who will be receiving payments.
- 1d. Enter the Federal Tax Identification Number (9-digits) or the Vendor Identification Number assigned by the State of Texas Comptroller (14-digits).
- 1e. Enter applicant's legal authority to contract. Examples of legal authority to contract include: 501(c)(3), Board resolution, letter of authority, sole proprietorship, partnership, statutory citation for a governmental entity (health department, local government, state agency, school district).

2. TYPE OF ENTITY

The type of entity is defined by the Secretary of State and/or the Texas State Comptroller. Enter the appropriate letter in the box provided. If the response is F. Individual or G. For Profit, applicant must also respond to the question is the entity a HUB (historically underutilized business)? HUB is defined as a corporation, sole proprietorship, or joint venture formed for the purpose of making a profit in which at least 51% of all classes of the shares of stock or other equitable securities are owned by one or more persons who have been historically underutilized (socially disadvantaged) because of their identification as members of certain groups: Black American, Hispanic American, Asian Pacific American, Native American, and Women. The HUB must be certified by the General Services Commission or another entity.

3. TYPE OF PROPOSAL

Check the appropriate type proposal. "New" means a new assistance award. "Continuation" means an extension for an additional budget period for a contract awarded under a multi-year project period.

4. PROPOSED PROJECT PERIOD

Enter project period for this proposal. For purposes of this form, the project period is defined as the total time for which support of a project has been authorized by TDH. A project period may consist of one or more budget periods. The total project period comprises the original project period and any extensions.

5. COUNTIES AFFECTED BY PROJECT

List the counties that are affected by the project.

6. AMOUNT OF FUNDING REQUEST

Enter the amount requested from TDH for the proposed budget period. For purposes of this form, the budget period is defined as the period of time to be funded by a TDH contract.

7. ALL DATA IN THIS PROPOSAL ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT, AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.

- 7a. Type in the name and title of the person authorized to represent the applicant.
- 7b. Enter the area code and telephone number of the person authorized to represent the applicant.
- 7c. The person authorized to represent the applicant must sign in this block.
- 7d. Enter the date the person authorized to represent the applicant signed this form.

NOTE: Evidence of the persons authority to represent the applicant must be on file in the applicant's headquarters. A copy of the governing body's authorization for the person to sign this proposal as an official representative must be on file in the applicant's office.

Form B
TEXAS DEPARTMENT OF HEALTH
PROPOSAL CHECKLIST

Legal Name of Applicant _____

INSTRUCTIONS: This Checklist must be completed and submitted with the original proposal. It is provided to ensure that the proposal is complete, proper signatures are included, and the required assurances, certifications, and attachments have been submitted. The proposal is typed (computer or typewriter), single-spaced on 8 ½" x 11" white paper, and does not exceed page limits where specified. Confidential information is clearly marked in the proposal and reasons the information should be confidential are stated.

APPLICATION CONTENT

	Included	N/A
A. Face Page is completed, and proper signature and date are included	_____	_____
B. Application Checklist is completed and attached to original application	_____	_____
C. Contact Person Information	_____	_____
D. Administrative Information (with supplemental documentation)	_____	_____
E. Applicant Background is included	_____	_____
F. Assessment Narrative is included	_____	_____
H. Project Description and Work Plan (goals, objectives, performance measure(s), capacity of organization including an organization chart, and service delivery plan) are included	_____	_____
I. Financial Information		
1. Funding Information Form is completed and letters of good standing and financial statements are attached if required	_____	_____
2. Budget:		
• Budget Summary Form is complete	_____	_____
• Budget Category Detail Forms are included	_____	_____
• Contractor's Bid Proposal Form is included (if applicable) and a functional program narrative is attached	_____	_____
J. Other Required Forms and Documentation are attached and signed		
1. Historically Underutilized Businesses [HUBs]	_____	_____
2. Assurances	_____	_____
3. Certifications	_____	_____
4. Disclosure of Lobbying Activities	_____	_____
5. Nonprofit Board of Directors and Executive Director Assurances Form	_____	_____
6. Certification Regarding License, Certificate or Permit	_____	_____

Form C
Contact Person Information

Legal Name of Applicant: _____

The purpose of this form is to provide information to TDH about the appropriate contact person in the applicant's organization. Please type in complete information about each person authorized to perform the following responsibilities. If any of the following information changes during the term of the contract, please notify the Vendor Coordinator, Grants Management Division, TDH.

Name of

Applicant's Authorized Representative: _____

Title: _____

Address: _____

E-Mail Address: _____

Telephone Number: _____ **Fax Number:** _____

Name of

Project Coordinator: _____

Title: _____

Address: _____

E-Mail Address: _____

Telephone Number: _____ **Fax Number:** _____

Name of contact person

regarding this proposal: _____

Title: _____

Address: _____

E-Mail Address: _____

Telephone Number: _____ **Fax Number:** _____

Name of Financial Officer: _____

Title: _____

Address: _____

E-Mail Address: _____

Telephone Number: _____ **Fax Number:** _____

Name of person responsible for Project

Quality Assurance (if applicable): _____

Title: _____

Address: _____

E-Mail Address: _____

Telephone Number: _____ **Fax Number:** _____

Form D
FUNDING INFORMATION FORM

Legal Name of Applicant: _____

Funding From Other State of Texas Agencies (Do not include TDH funding)				
State of Texas Agency & Program Name	Name of Contact Person at State Agency	Telephone No.	Period Funds Available	Total Amount of Funding
				\$
				\$
				\$
				\$
				\$
TOTAL STATE AGENCY FUNDING				\$

A letter of good standing from each State agency providing funds to applicant (other than TDH) should be attached behind this form.

Applicant's fiscal year ending month is: _____

Applicant must enter the total projected amount of federal expenditures for applicant's current fiscal year. Projected amount should include funding for all activities including "pass through" funds from all State agencies. Do not include funds being requested in this proposal; however, any other TDH funds that have been awarded to the applicant that are pass-through federal funds should be included in the projection. \$ _____

Applicant must enter the total projected amount of State expenditures for applicant's current fiscal year. Projected amount should include funding for all activities, including TDH funds, except funds being requested in this proposal. \$ _____

Form E
BUDGET SUMMARY

Legal Name of Applicant: _____

Cost Categories	TDH Funds Requested (1)	Direct Federal Funds (2)	Other State Agency Funds (3)	Local Funding Sources (4)	Other Funds (5)	Total (6)
A. Personnel	\$	\$	\$	\$	\$	\$
B. Fringe Benefits	\$	\$	\$	\$	\$	\$
C. Travel	\$	\$	\$	\$	\$	\$
D. Equipment	\$	\$	\$	\$	\$	\$
E. Supplies	\$	\$	\$	\$	\$	\$
F. Contractual	\$	\$	\$	\$	\$	\$
G. Construction	N/A	\$	\$	\$	\$	\$
H. Other	\$	\$	\$	\$	\$	\$
I. Total Direct Costs	\$	\$	\$	\$	\$	\$
J. Indirect Costs	\$	\$	\$	\$	\$	\$
K. Total (Sum of I and J)	\$	\$	\$	\$	\$	\$
L. Program Income -- Projected Earnings	\$	\$	\$	\$	\$	\$
M. Match						
--In-Kind	\$	\$	\$	\$	\$	\$
--Other Match	\$	\$	\$	\$	\$	\$

Indirect costs are based on (mark the statement which is accurate):

- ☐ The applicant's most recently approved indirect cost rate (_____%). A copy is attached behind the OTHER Budget Category Detail Form.
- ☐ The applicant's most recently approved indirect cost rate (_____%) which is on file with TDH's Fiscal Division.
- ☐ Uniform Grant Management Standards.

Form E
BUDGET SUMMARY INSTRUCTIONS

This form should reflect funding from all sources that support the project described in this application. Itemize the amount of support for each funding source and sum columns A through M and sum rows 1-5. See "Budget Forms and Instructions" for definitions of cost categories. For purposes of this form, the column headings have the following meanings:

- Column 1: The amount of funds requested from the Texas Department of Health (TDH) for this project.
- Column 2: Federal funds awarded directly to applicant.
- Column 3: Funds awarded to applicant from other State of Texas governmental agencies.
- Column 4: Funds awarded to applicant by local governmental agencies (city, county, local health department, etc.).
- Column 5: Funds from other sources not previously addressed in columns 1-4 (third party reimbursements, private foundations, donations, fund-raising).
- Column 6: The sum of columns 1-5.

Program Income: Projected Earnings. Applicant must estimate the amount of program income that is expected to be generated during the budget period.

Match: If applicant is required to provide a match with this application, applicant shall enter the amount of matching funds contributed from the appropriate funding column(s). Costs and third party in-kind contributions counting towards satisfying a cost sharing or matching requirement must be verifiable from the applicant's records. These records must show how the value placed on third party in-kind contributions was derived. To the extent feasible, volunteer services will be supported by the same methods that the applicant uses to support the allocability of regular personnel costs. Third party in-kind contributions count toward satisfying a cost sharing or matching requirement only where, if the party receiving the contributions were to pay for them, the payments would be allowable costs.

In-Kind: The dollar value of in-kind contributions should be reflected in the appropriate line of row M. In-Kind Match and in the appropriate funding source column heading. The value placed on donated or volunteer services must be reasonable and must be documented to the satisfaction of TDH prior to being accepted as match. Documentation supporting the reasonableness and value of donated or volunteer services must be attached behind the BUDGET SUMMARY form.

Other Match: Enter the dollar amount of funds which will be used to match TDH funds for the proposed activity in row M. Other Match under the column heading which reflects the source of the other match. Match may come from sources such as local funds, other state grants, federal grants, private donations, or private foundations if not otherwise restricted.

Form F
BUDGET FORMS AND INSTRUCTIONS

Application Requirements

The application must include a detailed breakdown of budget cost categories and a narrative justification. Details of each cost category shall be expressed using the budget category detail forms which follow. Definitions of the cost categories and instructions and examples of how to itemize the contents of each cost category are included after the budget category detail forms. The budget narrative shall explain and justify the proposed budget request. The budget category detail forms have space for a narrative; however, if more space is needed, attach additional sheets of paper to the respective budget category detail form. Computer generated facsimiles may be substituted for any of the forms; however, the exact wording and format must be maintained.

Allowable and Unallowable Costs

Below is a brief listing of allowable and unallowable costs as prescribed by federal cost principles or TDH policy. Applicable federal cost principles provide additional information and guidance on allowable and unallowable costs. In addition, see **Section I. item D. Use of Funds** for allowable and unallowable costs specific to this RFP.

An **allowable cost**, in accordance with federal cost principles, meets the following criteria:

- * It is necessary and reasonable for proper and efficient administration of the funded program;
- * It can be allocated to the funded program and is not a general expense needed to carry out the contractor's general responsibilities;
- * It is authorized or is not prohibited under applicable laws or regulations;
- * It conforms to applicable limitations or exclusions;
- * It is consistent with applicable policies and procedures;
- * It is treated consistently through the application of generally accepted accounting principles appropriate to the circumstances;
- * It is not allocated or included as a cost of any other program; and
- * It is the net sum of all applicable credits.

Unallowable costs, i.e., costs that may not be paid with TDH funds include, but are not limited to:

- ~ Advertising and public relations costs other than those specifically allowed by terms of the contract attachment or those incurred for the purpose of personnel recruitment, solicitation of bids and disposal of surplus materials;
- ~ Bad debts;
- ~ Construction is not allowed without the prior written approval of TDH;
- ~ Contingency reserve funds;
- ~ Contributions and donations;
- ~ Entertainment costs including amusement/social activities and their related costs (meals, beverages, lodgings, rentals, transportation, and gratuities) are not allowed unless the costs are directly related to the program's purpose and TDH has reviewed and issued prior written approval of the work plan components that relate to entertainment costs;

- ~ Fines, penalties, late payment fees, bank overdraft charges;
- ~ Fundraising;
- ~ Interest (unless specifically authorized by applicable cost principles or authorized by federal or state legislation);
- ~ Lobbying.

Direct Costs

Direct costs are those that can be specifically identified with a particular award, project, service, scope of work or other direct objective of an organization. These costs may be charged directly to the TDH contract attachment (if applicant is awarded a contract). These costs may also be charged to cost objectives used to accumulate all costs pending distribution to specific contracts and other purposes. Direct cost categories include: personnel, fringe benefits, travel, equipment, supplies, contractual, and other.

Indirect Costs

Indirect costs are those that have been incurred for common or joint objectives and cannot be readily identified with a particular final cost objective. The amount of indirect costs that may be charged to any resulting TDH contract attachment is determined by negotiation and will be defined in the contract budget attachment.

Audit Requirements

If required by OMB Circular A-133 and/or UGMS, applicant or applicant's authorized contracting entity shall arrange for a financial and compliance audit (Single Audit). Applicant may include in the budget request an amount for TDH's proportionate share of costs. The audit must be conducted by an independent CPA and must be in accordance with applicable OMB Circulars, Government Auditing Standards, and UGMS. Audit services shall be procured in compliance with state procurement procedures, as well as the provisions of UGMS.

Form F
PERSONNEL Budget Category Detail Form

LEGAL NAME OF APPLICANT: _____

Functional Title + Code E=Existing P=Proposed	% Time	Certification/ License Required	Total Annual Salary	Salary Requested for Project	Vacant Y/N	Justification
FRINGE BENEFITS: Itemize the elements of fringe benefits in this space. Attach an additional sheet of paper if more space is required.				SALARY TOTAL		\$
				Fringe Benefits Rate _____ %		
				FRINGE BENEFITS TOTAL		\$

Form F
TRAVEL Budget Category Detail Form

LEGAL NAME OF APPLICANT: _____

Local Travel Costs (Travel and Per Diem)

Mileage Reimbursement Rate	Estimated Number of Miles	Estimated Mileage Cost	Estimated Per Diem Costs	Estimated Total Local Travel Costs (Mileage plus Per Diem)	Justification (Include who or what position will be traveling, area or locations to cover, and why local travel is necessary to accomplish the project.)

Conference/Workshop Costs

Name and/or Description of Conference/Workshop	Location (City)	No. of Applicant Employees Attending (for whom TDH funds are requested)	Estimated Travel Cost (# of Miles x Reimbursement Rate; Estimated Airfare, etc.)	Estimated Per Diem Cost	Estimated Related Travel Costs (taxi, etc.)	Estimated Total Conference/Workshop Cost	Justification
TOTAL			\$	\$	\$	\$	

NOTE: All contracts with the Texas Department of Health require that a written travel policy be maintained by the contracting entity. Attach a copy of the travel policy as an appendix to the proposal. If a written travel policy is not in place, TDH's travel policy will be used.

Form F
EQUIPMENT Budget Category Detail Form

LEGAL NAME OF APPLICANT: _____

Amount requested in budget for equipment: \$ _____

Itemize, describe and justify the list below. Attach complete specifications or a copy of the purchase order. Equipment is defined by TDH as non-expendable personal property with a unit cost of more than \$1,000.00 and a useful life of more than one year, with the following exceptions: fax machines, stereo systems, cameras, video recorders/players, microcomputers, printers, software, medical and laboratory equipment which cost over \$500. Medical and laboratory equipment in this classification are defined as microscopes, oscilloscopes, centrifuges, balances, and incubators. Medical and laboratory equipment not included in these five categories are not considered a capital asset unless the unit value is over \$1,000.00. These exceptions must be approved for purchase as equipment and are considered capital assets for inventory purposes.

DESCRIPTION OF ITEM (≥ \$1,000 or Exceptions)	COST PER UNIT/# OF UNITS	TOTAL	PURPOSE & JUSTIFICATION

Form F
SUPPLIES Budget Category Detail Form

LEGAL NAME OF APPLICANT: _____

Amount requested in budget for supplies: \$ _____

Itemize, describe and justify the supply items listed below. Costs may be categorized by each general type (e.g. office, computer, medical, educational, janitorial, etc.).

DESCRIPTION OF ITEMS (# \$1,000 excluding equipment exceptions)	COST PER UNIT/# OF UNITS	TOTAL	PURPOSE & JUSTIFICATION

Form F
CONTRACTUAL Budget Category Detail Form

LEGAL NAME OF APPLICANT: _____

Amount requested in budget for contractual: \$_____. List only contracts for health or health-related services provided directly to applicant's clients by a third party. If a third-party is not yet identified, describe the service to be contracted and show contractor as "To be named." Justification for any contract that delegates a substantial portion of the scope of the project i.e. \$25,000 or 25% of the applicant's funding request whichever is greater, must be attached behind this form.

Contractor Name (Agency or Individual)	Description of Services (Scope of Work)	Method of Reimbursement (Cost Reim- bursement or Unit Cost)	# of Hours or Units of Service	Unit Cost Rate (If Applicable)	Total	Justification

Form F
OTHER Budget Category Detail Form

LEGAL NAME OF APPLICANT: _____

Amount requested in budget for other: \$_____

Description	Cost (Include # of Units x Unit Cost if applicable)	Purpose and Justification

Form F
DEFINITION OF COST CATEGORIES, INSTRUCTIONS AND EXAMPLES

A. PERSONNEL

DEFINITION: Actual salaries and wages for all staff positions in the proposed project that will provide direct care and administrative services (including clerical) to the project.

TDH requires that the distribution of salaries and wages be supported by personnel activity reports (time sheets). These reports must be maintained for all staff members (professionals and non-professionals) whose compensation is charged, in whole or in part, directly to the TDH contract. The reports must reflect an after-the-fact determination of the actual activity of each employee. Budget estimates (i.e., estimates determined before the services are performed) do not qualify as support for charges to awards. Each report must account for the total activity for which employees are compensated and which is required in fulfillment of their obligations to the organization. The reports must be signed by the individual employee and by a responsible supervisory official having first-hand knowledge of the activities performed by the employee(s).

INSTRUCTIONS: Enter the following information for each position on the PERSONNEL Budget Category Detail Form: functional title, whether the position is existing or proposed, % of time dedicated to the project, any certification or license an individual must possess to be qualified for the position, the total annual salary, the amount of TDH funds requested for this position's salary (% of time dedicated to the project multiplied by the annual salary), whether the position is vacant or filled, and the justification for the position. Justification may include a brief description of the position's primary responsibilities and an explanation for the % of time dedicated to the project, why the position classification is appropriate (including license/certification requirements), and an explanation of reasonableness of the annual salary.

B. FRINGE BENEFITS

DEFINITION: Fringe benefits paid by the applicant on behalf of its employees. This includes employer contributions for social security, retirement, health and accident insurance, and workers' compensation insurance. Fringe benefits requested should represent actual benefits paid for employees.

INSTRUCTION: Itemize the elements of fringe benefits and indicate the % rate on the PERSONNEL Budget Category Detail Form.

C. TRAVEL

DEFINITION: The costs of transportation, lodging, meals and related expenses incurred by the applicant's staff while traveling to perform duties required by the proposed project are classified as travel. This includes personal auto mileage for travel by employees. Costs related to client transportation and registration fees should be classified as "Other" not "Travel."

INSTRUCTIONS: The TRAVEL Budget Category Detail Form requires information on local travel costs (travel and per diem) and information on conferences/workshops for which TDH funding is being requested. For local travel, enter the reimbursement rate for automobile mileage and the estimated number of miles to be traveled for the budget period. To calculate the total estimated local travel costs, multiply the local reimbursement rate per mile by the total estimated number of automobile miles. Enter the estimated per diem costs which may be associated with local travel and show the basis for cost (15 partial days x \$7 per partial day = \$105). The justification should include who or what position classification(s) will be traveling and why local travel is necessary to accomplish the project. For conferences/workshops, the following must be included for all attending for whom TDH funds are being requested: the name and/or description of the conference/workshop, the location (city), the number of persons attending, estimated travel, per diem, other related travel costs (excluding registration fees) and total costs for all attending. The justification should include how attendance at the conference/workshop will directly benefit the project and why it is necessary to accomplish the project.

All contracts with the Texas Department of Health require that a written travel policy be maintained by the contracting entity. Attach a copy of the travel policy as an appendix to the proposal. If a written travel policy is not in place, TDH's travel policy will be used.

D. EQUIPMENT

DEFINITION: Equipment is defined by TDH as non-expendable personal property with a unit cost of more than \$1,000.00 and a useful life of more than one year, with the following exceptions: fax machines, stereo systems, cameras, video recorders/players, microcomputers, printers, software, medical and laboratory equipment. Medical and laboratory equipment in this category is defined as microscopes, oscilloscopes, centrifuges, balances, and incubators. Medical and laboratory equipment not included in these five categories are not considered a capital asset unless the unit value is over \$1,000.00. The exception items listed will still be inventoried if their unit cost plus any items used with or attached to the unit is \$500.00 or greater. For items with component parts (i.e., computers), the aggregate cost must be considered when applying the \$500/\$1,000 threshold.

INSTRUCTIONS: Enter the following information on the EQUIPMENT Budget Category Detail Form for each type of equipment item: description of each item, the cost per unit, the number of units to be purchased, the total amount for the line item (multiply the cost per unit by the number of units), state the purpose for the item(s) and why the equipment is necessary and how the applicant determined or will determine that the cost is reasonable. Attach a complete specification or a copy of the purchase order.

EXAMPLES OF EQUIPMENT DESCRIPTIONS

Remember: Equipment is priced **per unit** including freight. If you intend to purchase 10 modems @ \$95 each, this would be considered a supply item not an equipment item.

INCORRECT EXAMPLES

Computer-166 Mh Pentium

1 @ \$2,150

(Insufficient description/specification)

1 @ \$250 Laser Jet Printer

*(This item would be moved to supplies
as it is less than \$500.00).*

CORRECT EXAMPLES

Packard Bell Multimedia C-110, Hard Drive
1081.7

MB; 14.4 AMSP modem fax;
.44 MB 3.5" diskette

drive, CD ROM 4X CDR-173; Mouse,
Color monitor; Keyboard, Windows '95
pre-installed.

1 @ \$2,150

24" Zenith Portable TV/VCR Combination;
Model #Z12345

1 @ \$750

E. SUPPLIES

DEFINITION: Costs for materials and supplies necessary to carry out the program. This includes medical supplies, drugs, janitorial supplies, office supplies, patient educational supplies, software less than \$500, plus any equipment with a purchase price including freight not to exceed \$1,000 per item, except those listed in the "equipment" category.

INSTRUCTIONS: Enter the following information in the SUPPLIES Budget Category Detail Form for each general category or type of supplies: description of the items, the cost per unit, the number of units to be purchased, the total amount for the line item (multiply the cost per unit by the number of units), and state the purpose for the item(s), why the equipment is necessary and how the applicant determined or will determine that the cost is reasonable.

F. CONTRACTUAL

DEFINITION: The contractual section includes only costs incurred for health or health-related services rendered directly to the applicant's clients by a third party. Examples of the services that may be included in this category are: counseling, education, nursing, lab fees, physician's fees, radiology, pharmacy, therapy, etc. Travel by these individuals should be included in this category if they are delivering client services. Contracts for administrative services are not included in this category; they are properly classified in the Other category.

If the applicant enters into grant contracts with subrecipients or procurement contracts with vendors, the documents will be in writing and will comply with the requirements specified in the Contracts with Subrecipients and Contracts for Procurement articles in the General Provisions for Texas Department of Health Grant Contracts (see **APPENDIX A: Sample General Provisions, Texas Department of Health Contracts**, 1999 version).

If an applicant plans to enter into a contract which delegates a substantial portion of the scope of the project i.e. \$25,000 or 25% of the applicant's funding request whichever is greater, the applicant must submit justification to TDH and receive prior written approval from TDH before entering into the contract.

INSTRUCTIONS: The CONTRACTUAL Budget Category Detail Form requires the names of the individuals or organizations performing the services, a description of the services being contracted, the number of hours or units of service to be purchased, the method of reimbursement (cost reimbursement or unit cost), unit cost if applicable and total amount of each subcontract. Justification should include why applicant intends to contract for the service, why the service is necessary to perform the scope of work and how the applicant will ensure that the cost of the service is reasonable.

Justification for contracts that delegate a substantial portion of the scope of the project i.e. \$25,000 or 25% of the applicant's funding request whichever is greater, must be attached behind the CONTRACTUAL Budget Category Detail Form.

G. CONSTRUCTION - TDH does not fund construction projects.

H. OTHER

DEFINITION: All other allowable direct costs not listed in any of the above categories are to be included in this category. Some of the major costs that should be budgeted in this category are:

- * contracts for administrative services or non-medical services;
- * space and equipment rental;
- * utilities and telephone expenses;
- * data processing services;
- * printing and reproduction expenses;
- * postage and shipping;
- * contract clerical or other personnel services;
- * janitorial services;
- * exterminating services;
- * security services;
- * insurance and bonds;
- * equipment repairs or service maintenance agreements;
- * books, periodicals, pamphlets, and memberships;
- * advertising;
- * registration fees;

- * patient transportation;
- * training costs, speakers fees and stipends.

INSTRUCTIONS: The OTHER Budget Category Detail Form requires a general description of the service and the cost. The justification should include an explanation of the purpose of the service and how it is necessary for the completion of the activity. The justification should also include a statement of when services will be utilized if other than the full RFP budget period.

I. TOTAL DIRECT CHARGES

The amount to be entered on row I Total Direct Costs, of the BUDGET SUMMARY form, is the sum of all direct cost categories (A through H).

J. INDIRECT COSTS

DEFINITION: Those costs related to the project that are not included in direct costs. Indirect costs are those costs incurred for a common or joint purpose benefitting more than one cost objective and not readily identified with a particular cost center and which may be paid if allowable under the funding source, e.g., depreciation and use allowances, interest, operation and maintenance expenses (janitorial and utility services, repairs and normal alterations of buildings, furniture, equipment, care of grounds, security), general administration and general expenses (central offices such as director, office of finance, business services, budget and planning, personnel, general counsel, safety and risk management, management information services).

The applicant may negotiate an indirect cost rate with its federal cognizant agency or state coordinating agency. If there is no assigned agency, TDH's Fiscal Division may provide guidance on how to have an agency assigned or TDH's Fiscal Division may review the applicant's cost allocation plan and negotiate an approved indirect cost rate. The TDH Fiscal Division will maintain a listing of agencies and their approved rates. To obtain information about cognizant agencies or negotiating an indirect cost rate, contact the TDH Fiscal Division at (512) 458-7435.

If the applicant does not have an approved indirect cost rate and does not intend to negotiate one, then funds may be budgeted in accordance with Uniform Grant Management Standards (UGMS) which reads as follows:

"In lieu of determining the actual indirect costs of the service for which a state award is made, a grantee may recover up to 10 percent of the direct salary and wage costs of providing the service (excluding overtime, shift premiums, and fringe benefits) as indirect costs, subject to adequate documentation [of direct salary and wage costs]. Applicants choosing this method of indirect cost recovery are prohibited from seeking recovery using a cost allocation plan, rate or other methods for the same period."

INSTRUCTIONS: A Budget Category Detail Form has not been developed for the Indirect Cost Category. Applicant should indicate the indirect cost rate (if applicable) on the BUDGET SUMMARY page and mark the box which contains the appropriate statement regarding the support for the indirect charge. If applicant attaches a copy of the most recently approved indirect cost rate, it should be placed behind the OTHER Budget Category Detail Form.

K. TOTAL

The amount to be entered on row K Total, of the BUDGET SUMMARY form, is the sum of Total Direct Costs and Indirect Costs (I + J).

L. PROGRAM INCOME

DEFINITION: All revenue directly generated by a TDH contract-supported activity or earned as a result of a TDH contract during the contract term (beginning and ending dates). This includes fees or charges made by the contractor in connection with activities supported in whole, or in part, by a federal/state contract. This income will be identified and reported quarterly and annually utilizing the report forms identified in the contract.

For more information about program income, refer to APPENDIX A - TDH CONTRACT GENERAL PROVISIONS (Sample), and/or request a copy of TDH's Financial Administrative Procedures Manual.

The TDH program will consider future funding levels of a contractor based in part upon their proficiency in identifying, billing, collecting, and reporting program income and in utilizing it for the purposes and conditions as specified in the contract attachment.

INSTRUCTIONS:

Projected Earnings. Applicant must enter on the BUDGET SUMMARY form the estimated amount of program income that is expected to be generated during the budget period.

Examples Of Program Income

- * *fees received for personal services performed in connection with and during the period of contract support;*
- * *tuition and fees when the course of instruction is developed, sponsored, and supported*
- * *by the applicable contract from state or federal sources;*
sale of services such as laboratory tests or computer time; or
payments received from patients or third parties for medical or hospital service, such as Title XIX or Title XX reimbursements, insurance payments, or patient fees. These payments may be made under either a cost reimbursement or a fixed price agreement;
- * *lease or rental of films or video tapes; and*
rights or royalty payments resulting from patents or copyrights developed or acquired by the contractor.

M. MATCH

DEFINITION: The portion of allowable costs incurred under the proposed project borne by unrestricted funding sources or the value of third party in-kind contributions applicable to the period to which the match requirement applies.

Costs and third party in-kind contributions counting towards satisfying a cost sharing or matching requirement must be verifiable from the applicant's records. These records must show how the value placed on third party in-kind contributions was derived. To the extent feasible, donated or volunteer services will be supported by the same methods that the applicant uses to support the allocability of regular personnel costs. Applicant must provide supporting documentation of the reasonableness and value of donated and volunteer services. Third party in-kind contributions count toward satisfying a cost sharing or matching requirement only where, if the party receiving the contributions were to pay for them, the payments would be allowable costs.

INSTRUCTIONS: If the applicant is required to provide a match with this application, applicant shall enter on the BUDGET SUMMARY form the amount of matching funds contributed under the appropriate funding column(s).

In-Kind. Enter the dollar value of in-kind contributions in row M. In-Kind Match under the column heading which reflects the source of the in-kind contribution. The value placed on donated or volunteer services must be reasonable and must be documented to the satisfaction of TDH prior to being accepted as match. Documentation supporting the reasonableness and value of donated or volunteer services must be attached behind the BUDGET SUMMARY form.

Other Match. Enter the dollar amount of funds which will be used to match TDH funds for the proposed activity in row M. Other Match under the column heading which reflects the source of the other match.

Form G

Texas Department of Health Child Support Certification*

The Texas Family Code, §231.006, VTCA places certain restrictions on child support obligors. Contracts with governmental entities or nonprofit corporations are not subject to §231.006.

The contractor identified below is not a governmental entity or a nonprofit corporation and certifies to the following:

1. The contractor is: (check one) ☐ An individual or sole proprietor, or
☐ A business entity (corporation, partnership, joint venture, limited liability company, association, etc.)
2. The contractor certifies that the following is a complete list of the names and social security numbers of either (a) the individual or sole proprietor who is the contractor or (b) each partner, shareholder, or owner with an ownership interest of at least 25% of the contractor/business entity: (attach additional sheet if necessary).

(A) Printed Name: _____
Social Security Number: _____

(B) Printed Name: _____
Social Security Number: _____

3. Under the Texas Family Code, §231.006, VTCA the contractor certifies that the individual or business entity named in this contract, bid, or application is not ineligible to receive the specified grant, loan, or payment and acknowledges that this contract may be terminated and payment withheld if this certification is inaccurate. A child support obligor who is more than 30 days delinquent in paying child support or a business entity in which the obligor (who is more than 30 days delinquent) is the sole proprietor, partner, shareholder, or owner with an ownership interest of at least 25% is not eligible to receive the specified grant, loan or payment. The contractor understands that it is the contractor's responsibility to verify whether a child support obligor who is more than 30 days delinquent is the sole proprietor, partner, shareholder or owner with an ownership interest of at least 25%.

4. Printed Name of Contractor: _____

Printed Name of Authorized Representative
Signing this Certification: _____

Signature of Authorized Representative: _____

Date: _____

*For purposes of this form, the word "contractor" is referring to the organization responding to a TDH RFP and the word "contract" should be read as "any proposed contract that results from a TDH RFP."